HAWAII STATE ETHICS COMMISSION DISCLOSURE OF FINANCIAL INTERESTS (LONG FORM)

DISCLOSURE OF FINANCIAL INTERESTS (LONG FORM)		
NAME (Last, First, Middle)	STATE POSITION HELD: (Dept/Div or Board/Commission)	
Abulsa, Leinada S.P.	Bd of Education TERM OF OFFICE (Begin/End): 200412008	
FOR EACH ITEM, EXCEPT ITEM 9, DISCLOSE INTERE	STS OF FILER, SPOUSE, AND DEPENDENT CHILDREN.	

FOR EACH ITEM, EXCEPT ITEM 9, DISCLOSE INTERESTS OF FILER, SPOUSE, AND DEPENDENT CHILDREN. USE THE ABBREVIATIONS: "F" for filer, "SP" for spouse, "DC" for dependent children, and "JT" for joint interests of the spouse and filer.

ITEM 1: INCOME FOR SERVICES RENDERED FOR PRECEDING CALENDAR YEAR

List the source (the term "source" also includes any state or other government agencies) and amount of all income of \$1,000 or more

received during the preceding calendar year, for services rendered, and the nature of the services rendered.

F,SP,DC,JT	NAME AND ADDRESS OF SOURCE OF INCOME	AMOUNT	SERVICES RENDERED
F	Hilton Grand Vacations Olub 2003 Kalia Rd. Hon, HI 96815	E	Principal Broker
	Hawaii Pacific University	C	Professor of Management
F	University of Hawaii &CC Diamond Head Road	В	Professor of Marketing
F	Farrington Adult Community	B	ESL Chinese
	School		teachen.
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]Check here if entry is None

[]Check here if additional sheets are attached

ITEM 2: OWNERSHIP OR BENEFICIAL INTERESTS IN BUSINESSES

List the amount and identity of every ownership or beneficial interest held during the disclosure period in any business incorporated, regulated, or licensed to carry on business in the State if the interest has a value of \$5,000 or more or is equal to 10% or more of the ownership of the business.

F,SP, DC,JT	BUSINESS NAME AND ADDRESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE OR NO. OF SHARES
F	L I I Realty P.O. Box 115030 Hon H1 96828	Real Estate Sales	President	100% owner
F	Hawaiian Cleofine Stock	Whility	Stock "	1,500.

]Check here if entry is None

[]Check here if additional sheets are attached

ITEM 3: TRANSFER OF OWNERSHIP OR BENEFICIAL INTERESTS IN BUSINESSES

List any ownership or beneficial interests in businesses transferred during the disclosure period and the date of transfer.

F,SP, DC,JT PERIOD DATE OF TRANSFER DURING THIS DISCLOSURE DATE OF TRANSFER

DATE OF TRANSFER

DATE OF TRANSFER

DATE OF TRANSFER

DATE OF TRANSFER

ITEM 4: CREDITORS

List the name and address of each creditor to whom the value of \$3,000 or more was owed during the disclosure period and the original amount and amount outstanding (excluding debts arising out of retail transactions or the purchase of consumer goods).

F,SP, DC,JT	NAME OF CREDITOR AND ADDRESS	ORIGINAL AMOUNT OWED	AMOUNT OUTSTANDING
F	P.O. Box 2200 Hon +1196801	\$45,000	415,000
F	Bank of Hacoaii	\$8,000	\$7,000
F	First Hawaiian Bank	# 1500	\$ 800
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[]Chec	[]Check here if entry is None []Check here if additional sheets are attached		

ITEM 5: OFFICERSHIPS, DIRECTORSHIPS, TRUSTEESHIPS

List every officership, directorship, trusteeship, or other fiduciary relationship held during the disclosure period in any business or organization, the term of office, and the annual compensation.

F,SP, DC,JT	NAME AND ADDRESS OF BUSINESS	TITLE HELD	TERM OF OFFICE	ANNUAL COMPENSATION
F	UCS = Unifed Chin. Soc.		3 yrs.	vose)
F	Kwangtung Lin yeu the	President	1 yr.	Hane
	OCAW- Org. of Chines	1		
1 5	00410-013.9	President	lyr.	pore
		,		
[]Che	[]Check here if entry is None []Check here if additional sheets are attached			

ITEM 6: INTERESTS IN REAL PROPERTY HELD IN THE STATE

List interests in real property in the State, held during the disclosure period, if the interest has a value of \$10,000 or more.

TAX MAP KEY NUMBER

VALUE

	bo N. Beretania & Honth 96817 here if entry is None ITEM 7: INTERESTS IN RE	[]Check here if a	additional sheets are attached
	s in real property in the State, acquired during the disclo TAX MAP KEY NUMBER & STREET ADDRESS	sure period, if the interest has a va	NAME OF PERSON
DC,JT	IAA WAF KET NUWBEN & STREET ADDRESS	CONSIDERATION PAID	RECEIVING THE CONSIDERATION
Check	here if entry is None	[]Check here if a	dditional sheets are attached
List interest	ITEM 8: INTERESTS IN REAL s in real property in the State, transferred during the disc		value of \$10,000 or more.
F,SP, DC,JT	TAX MAP KEY NUMBER & STREET ADDRESS	AMOUNT & NATURE OF CONSIDERATION RECEIVED	NAME OF PERSON FURNISHING THE CONSIDERATION
[V]Check	here if entry is None	[]Check here if a	dditional sheets are attached

F,SP, DC,JT

STREET ADDRESS

ITEM 9: CLIENTS PERSONALLY REPRESENTED BEFORE STATE AGENCIES

List the names of clients personally represented by you be during the disclosure period, excluding clients represented		n ministerial matters, for a fee or compensatio	n
NAME OF CLIENT •	NAME OF STATE AGEN	ICY	

NAME OF CLIENT .	NAME OF STATE AGENCY

ITEM 10: CREDITOR INTERESTS IN INSOLVENT BUSINESSES

List the amount and identity of every creditor interest in insolvent businesses, held during the disclosure period, if the interest has a value of \$5,000 or more.

F,SP,DC,JT	NAME AND ADDRESS OF BUSINESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE
			OA NOV 18 A9:41 STATE OF HAWA STATE ETHICS COHMISSION	RECEIVED

[Check here if entry is None []Check here if additional sheets are attached

CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement to the best of my knowledge and belief. If I have a spouse and/or dependent children, I also hereby certify that I have included their interests on this form to the best of my knowledge and belief. I understand that it is a violation of State law, chapter 84, HRS, if information is not disclosed as required by chapter 84, HRS. I further understand that there are statutory penalties for noncompliance.

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DATE